

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Richard J Klein
350-022
Ross Correctional Institution
PO Box 7010
Chillicothe, OH 45601

2. Article Number
(Transfer from serial)

7002 0860 0000 1410 1909

PS Form 3811, August 2001

Domestic Return Receipt

Doc 80

01-794

SSB

RECIPIENT: COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *W. D. R. H. A.*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

W D R H A

C. Date of Delivery

05/24/05

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

102595-02-M-1540